

031088 U.S. PTO
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UTILITY PATENT APPLICATION TRANSMITTAL (For new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. FA1114 US NA First Named Inventor or Application Identifier Harald Kloeckner
"EXPRESS MAIL CERTIFICATE" "EXPRESS MAIL" MAILING LABEL NUMBER <u>ER 430765737 US</u> DATE OF DEPOSIT: <u>November 18, 2003</u> I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. NAME OF PERSON MAILING PAPER OR FEE (TYPE OR PRINT) <u>Jeannette Y. Rayfield</u> SIGNATURE SIGN <u>Jeannette Y. Rayfield</u>		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		9. <input checked="" type="checkbox"/> The Title of the Invention: Process For Repairing Coatings
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. <u>04-1928</u> . <input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) (Submit an original, and a duplicate for fee processing) 2. <input type="checkbox"/> A Check in the Amount of \$ _____ is enclosed <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required and credit any overpayment to Deposit Account <u>04-1928</u> .		10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed _____ as the computer-readable form for the instant application. (37 CFR 1.821(e))
3. <input checked="" type="checkbox"/> The total fee is calculated as shown below: Basic Filing fee \$ 770.00 Total Claims 17 - 20 = 0 x \$18 \$ 0.00 Independent Claims 2 - 3 = 0 x \$86 \$ 0.00 <input type="checkbox"/> Multiple Dependent Claim present \$ 0.00 TOTAL FILING FEE \$ 770.00 <input type="checkbox"/> Reduction by 50% for filing by Small Entity \$ _____ <input type="checkbox"/> Cancel in this application original claims to _____ of the prior application before calculating the filing fee. Charge \$ _____ to the above indicated Deposit Account.		ACCOMPANYING APPLICATION PARTS 11. a. <input type="checkbox"/> Information Disclosure Statement (IDS) b. <input checked="" type="checkbox"/> Form PTO/SB/08a (1449) c. <input checked="" type="checkbox"/> Copies of all IDS Citations 12. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] <u>19</u> 5. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] _____		13. <input type="checkbox"/> Prior Application is Assigned to: <u>E.I. du Pont de Nemours and Company</u> (for continuation/divisional with Box 20a completed) 14. <input type="checkbox"/> Preliminary Amendment
6. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] <u>7</u> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 19a completed) c. <input checked="" type="checkbox"/> Unsigned Declaration [Note Box 6 below] i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		15. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 16. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 17. <input type="checkbox"/> Transfer all references cited by Applicants or by the Examiner from the parent Application Serial No. filed_. A PTO-1449 listing the references is enclosed.
7. <input checked="" type="checkbox"/> Application Data Sheet 37 CFR 1.76		18. <input type="checkbox"/> Applicant Claims Small Entity Status 19. <input type="checkbox"/> Other : _____
8. <input type="checkbox"/> Incorporation By Reference (useable if Box 6b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 6b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		

20. Priority Information, check appropriate box and supply the requisite information	
a The accompanying application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) Of prior application No: filed . Examiner: _____ Group/Art: _____	

21. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number: <u>23906</u> Address <u>E.I. du Pont de Nemours and Company</u> Telephone (302) 984-6058 Fax (302) 658-1192	22. RESPECTFULLY SUBMITTED, Signature Name <u>Hilmar L. Fricke</u> Date <u>November 18, 2003</u> Registration No. <u>22,384</u>
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23.	The Power of Attorney in the Prior Application includes: _____	
	<input type="checkbox"/> Recognize as Associate Attorney: _____	_____ Attorney Registration No.
	and address future correspondence to same as indicated in Box 21.	

The invention was made by an agency of the U. S. Government or under a contract with an agency of the U. S. Government.	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are:	_____.

(preferred arrangement of specification set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p>		Complete if Known	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Application Number	Unknown
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Filing Date	November 18, 2003
		First Named Inventor	Harald Kloeckner et al.
		Examiner Name	Unknown
		Group / Art Unit	Unknown
		Attorney Docket No.	FA1114 US NA

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																								
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Deposit Account Number 04-1928 </div> <div style="width: 60%;"> Deposit Account Name E. I. du Pont de Nemours and Company </div> </div> <p style="font-size: small;">The Commissioner is authorized to: (check all that apply)</p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	<h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Hilmar L. Fricke	Registration No. Attorney/Agent	22,384
Signature		Telephone	(302) 984-6058
		Date	November 18, 2003

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Alexandria, VA 22313-1450

on November 18, 2003
Date


Signature

JEANNETTE Y. RAYFIELD
Type or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

PROCESS FOR REPAIRING COATINGS

Application No.: Unknown

Filing Date: November 18, 2003

First Named Inventor: Harald Kloeckner et al.

Group Art Unit: Unknown

Examiner: Unknown

Attorney Docket: FA1114 US NA

Fee Transmittal

Application – 19 pages

Form PTO/SB/08a (1449) with references

Declaration/Power of Attorney (not executed)

Authorization to charge Deposit Account 04-1928

Receipt Cards